

GRADING PERMIT # 600009011

Building Address 13626 FOX STREAM WAY
WEST FRIENDSHIP, MARYLAND 21744

Suite/Apt. #: _____ SDP/WP/Petition #: GPO498

Census Tract 603000 Subdivision FOX MEADOW
TAXED # 03 229340342182

Section _____ Area _____ Lot 12

Tax Map 15 Parcel 1167 Grid 19

Zoning PROE0 Map Coordinates 911 Lot size 4,353 SF

Property Owner's Name JAMES H SELFRIDGE BUILDERS

Address 14045 GARED DRIVE

City GLENWOOD State MD Zip Code 21738

Home Phone 410-992-9631 Work Phone 410-531-8930

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use VACANT LOT

Proposed Use CUSTOM SFD

Estimated Construction Cost \$ 350,000

Description of Work 4 BR, 4 FB, 1/2 BA, 2 FP,
FRNT PACH, CVRD DECK, 3C GAR, PART,
FIN BSMT

Contractor Company JAMES H SELFRIDGE BUILDERS INC.

Contact Person NANCY BOONE

Address 14045 GARED DR

City GLENWOOD State MD Zip Code 21738

License No. 329

Phone 410-531-8930 Fax 410-531-8939

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company B

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>42'8"</u> <u>82'</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: <u>40'8"</u> <u>82'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>Finished 84.4'</u>	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>4</u>	
Multi-family dwellings: _____	
No. of efficiency units: _____	
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof: _____	
State Certified Modular _____	
Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Susan Conklin
 Applicant's Signature

Project Mgr
 Title/Company

SUSAN CONKLIN
 Print Name

9-13-04
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official		
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>9/27/04</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met?
 YES NO

Is Entrance Permit required?
 YES NO

Historic District?
 YES NO

Lot Coverage for NewTown Zone _____

SDP/Red-line approval date _____

PROPERTY ID#: 63410

Filing fee \$ 100

Permit fee \$ _____

Excise tax \$ _____

Add'l per. fee \$ _____

TOTAL FEES \$ _____

Sub-total paid \$ _____

Balance due \$ _____

Check # 27646

Validation # 76735

Accepted by [Signature]

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



RECEIVED
HARD COUNTY DEPARTMENT OF
ENVIRONMENTAL
2005 MR 24 PM 12:55

March 7, 2005

Mr. Joseph Williams
Department of Inspections,
Licenses and Permits
3430 Court House Drive
Ellicott City, Maryland 21043

Re: Permit #B00150314-~~A~~
Fox Meadow, Lot #12
13626 Fox Stream Way
West Friendship, Maryland 21794

Dear Joe:

The above referenced permit was submitted for application on 9/13/04. Since that time, the homebuyers have decided to change their house type and we would like to amend the permit for this new model. Below are the particulars:

Description of Work: 4 Bedroom, 5 Full Baths, (1) ½ Bath, 1 Fireplace, Rear Deck, 3 Car Garage

Building Characteristics: SF Dwelling
1st Floor: 65' Depth, 49' Width
2nd Floor: 65' Depth, 49' Width
Basement: Unfinished, 65' Depth, 49' Width

Contact Person: Sue Conklin, 410-531-8930, ext. 21

If you require any additional information, please feel free to contact me. Thank you.

Sincerely,

Sue Conklin

3/25/05
Helm Dept. dk
ESB

Encl.: Sprinkler Option Notification
(2) Site/Plot Plans
(2) House Plans

